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**RAWMARSH
URBAN DISTRICT COUNCIL**

ANNUAL REPORTS

OF THE

MEDICAL OFFICER

OF HEALTH

AND THE

SANITARY INSPECTOR

FOR

1953

RAWMARSH URBAN DISTRICT COUNCIL

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D. J. CUSITER, M.B., Ch.B., D.P.H., D.T.M. & H.

Sanitary Inspector :

G. RAWLINSON, Cert. R.S.I. & S.I.E.J.B.



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RAWMARSH URBAN DISTRICT COUNCIL

Annual Report of the Medical Officer of Health for the year 1953

Public Health Department,
Dunford House,
Doncaster Road,
Wath upon Dearne.

*To the Chairman and Members of the
Rawmarsh Urban District Council.*

Mr. Chairman, Madam and Gentlemen,

I have the honour to present to you the Annual Report on the health of the district for 1953.

The general health of the community continues to improve and we have an Infant Mortality rate of 21.6 per 1,000, this is the lowest rate ever recorded in the Urban District and is encouraging: The rate is lower than the National and County rate. For the third consecutive year there was no maternal death.

There was no death from Pulmonary Tuberculosis nor from Tuberculosis of other organs but there were no less than eight deaths from cancer of the lung (seven male and one female). This is similar to the West Riding as a whole where in 1952 there were, for the first time, more deaths from cancer of the lung or bronchus than from Tuberculosis. The one disease is infectious and the cause is known, the other is not infectious but is more common in males and generally commoner in industrial areas where the sun is blotted out and the air made foul by smoke from industry and domestic fires, nevertheless the cause of lung cancer is not yet known.

The housing situation has shown great improvement. 100 houses were completed for the Council, 2 for private owners and 280 for the Coal Industry Housing Association. This rate of housebuilding is at last beginning to ease the overcrowding that has been such a grave problem in the district since the end of the war. A separate house for every family is a better foundation for healthy living than any other social or medical factor.

The number of school children protected against Diphtheria has again increased and is now 87%—under five years of age it is only 39%. In simple language this means that if we have an epidemic the school children will be safe and the disease will strike and kill the under fives whose mothers are waiting for them to go to school before they are immunised. Unfortunately the Diphtheria germs do not wait until children go to school.

I thank the Council and Officials and Mr. Rawlinson the Sanitary Inspector for their ready co-operation and assistance in my work.

I remain,

Your obedient Servant,

D. J. CUSITER,
Medical Officer of Health.

Section A.
NATURAL AND SOCIAL CONDITIONS OF
RAWMARSH URBAN DISTRICT.

| | |
|--|------------|
| Area (in acres) | 2,607 |
| Population (Census 1951) | 18,789 |
| Registrar General's Estimate of Resident Population, mid 1953 | 18,850 |
| Number of Inhabited Houses (Census 1931) | 4,523 |
| Number of Inhabited Houses (31st December, 1953) | 5,648 |
| Rateable Value | £77,364 |
| Nett Product of a Penny Rate | £307. 10. |
| Height above Sea Level | 64—380 ft. |

There was full employment in the course of the Year and the local industries of coal mining, the steel industry and the chemical industry were all working to capacity. A new rolling mill has been completed for the Parkgate Iron and Steel Company and is in production. To the layman the rolling mill is a miracle of ingenuity and engineering skill, to the Medical Officer of Health it is a glimpse of a future where machines take the place of heavy manual labour and where working conditions are of a very high standard: Both these conditions are more than satisfied in this rolling mill.

COMPARATIVE VITAL STATISTICS FOR 1953.

| | 1953 | 1952 | Eng. & Wales 1953 |
|--|-------|-------|----------------------|
| Live Birth rate per 1,000 population: | | | |
| Crude | 17.19 | 17.08 | * |
| Adjusted | 18.05 | 17.93 | 15.5 |
| Stillbirth rate per 1,000 population ... | 0.47 | 0.59 | 0.35 |
| Death rate per 1,000 population: | | | |
| Crude | 9.81 | 10.67 | * |
| Adjusted | 11.18 | 12.16 | 11.4 |
| Infant Mortality rate per 1,000 live births | 21.60 | 31.25 | 26.8 |
| Neo-Natal Death rate per 1,000 live births | 15.46 | 25.0 | * |
| Maternal Mortality rate per 1,000 births | Nil | Nil | 0.76 |

* Figures not available.

VITAL STATISTICS FOR 1953 IN DETAIL.

| | Males. | Females. | Total. |
|-----------------------------------|--------|----------|--------|
| Live Births: Legitimate | 179 | 133 | 312 |
| Illegitimate | 5 | 7 | 12 |
| Total Live Births | | | 324 |
| Stillbirths: Legitimate | 3 | 3 | 6 |
| Illegitimate | — | 1 | 1 |
| Deaths of Infants under one year: | | | |
| Legitimate | 3 | 3 | 6 |
| Illegitimate | 1 | — | 1 |
| Deaths: All ages | 113 | 72 | 185 |

Stillbirths:

| | | | |
|------------------------|-----|-----|-------|
| Rate per 1,000 births | ... | ... | 21.15 |
| Comparability Factors: | | | |
| Births | ... | ... | 1.05 |
| Deaths | ... | ... | 1.14 |

Deaths from Puerperal Causes:

| | Deaths. | Death Rate per 1,000 births. |
|------------------------------------|---------|---------------------------------|
| Puerperal and Post-abortion sepsis | ... | ... |
| Other Maternal Causes | ... | ... |
| | Nil | — |
| | Nil | — |

Death Rate of Infants under one year:

| | | | |
|---|-----|-----|-------|
| All Infants per 1,000 live births | ... | ... | 21.60 |
| Legitimate infants per 1,000 legitimate live births | ... | ... | 22.44 |
| Illegitimate infants per 1,000 illegitimate live births | ... | ... | 83.33 |
| Neo-Natal Death rate | ... | ... | 15.46 |

Causes of Death in 1953.

| | Males. | Females |
|--|--------|---------|
| 1. Tuberculosis (Respiratory) | — | — |
| 2. Tuberculosis (Other) | — | — |
| 3. Syphilitic disease | 1 | — |
| 4. Diphtheria | — | — |
| 5. Whooping Cough | — | — |
| 6. Meningococcal Infections | — | — |
| 7. Acute Poliomyelitis | 1 | — |
| 8. Measles | — | — |
| 9. Other infective and parasitic diseases | — | — |
| 10. Cancer of Stomach | 3 | 2 |
| 11. Cancer of lungs or bronchus | 7 | 1 |
| 12. Cancer of Breast | — | 1 |
| 13. Cancer of uterus | — | 3 |
| 14. Other cancer or Lymphatic cancer | 11 | 5 |
| 15. Leukaemia or Aleukaemia | — | 1 |
| 16. Diabetes | — | 2 |
| 17. Vascular Lesions of the Nervous System | 11 | 15 |
| 18. Coronary disease or Angina | 11 | 7 |
| 19. Hypertension with Heart disease | 8 | 1 |
| 20. Other Heart disease | 20 | 10 |
| 21. Other Circulatory disease | 4 | — |
| 22. Influenza | — | — |
| 23. Pneumonia | 33 | — |
| 24. Bronchitis | 7 | 7 |
| 25. Other diseases of respiratory system | 1 | — |
| 26. Ulcer of Stomach or duodenum | 2 | — |
| 27. Gastritis, Enteritis or Diarrhoea | 1 | — |
| 28. Nephritis or Nephrosis | 2 | 1 |
| 29. Enlarged Prostate | 1 | — |
| 30. Pregnancy, Childbirth or abortion | — | — |
| 31. Congenital malformation | — | 1 |
| 32. Other defined or ill-defined diseases | 10 | 14 |
| 33. Motor vehicle accidents | 1 | — |

Causes of Death in 1953—continued.

| | | | | | | |
|-----------------------------------|-----|-----|-----|-----|-----|----|
| 34. All other accidents | ... | ... | ... | ... | 6 | 1 |
| 35. Suicide | ... | ... | ... | ... | 2 | — |
| 36. Homicide or operations of war | ... | ... | ... | ... | — | — |
| Totals | ... | ... | ... | ... | 113 | 72 |

The adjusted live birth rate is as usual higher than the national average, 18 per 1,000 population as against 15.5 for England and Wales. The reduction in infant mortality continues, 7 infants died as compared with 10 and 12 in 1951 and 1952 respectively.

Infant mortality is a sensitive index of medical and social conditions in any area. A low rate such as Rawmarsh enjoys indicates that these conditions are satisfactory. There was no maternal death and the stillbirth rates and neo-natal rates are low for an industrial area. There was no death from Tuberculosis but of 8 deaths from cancer of the lung or bronchus only one was female. There was one fatal case of poliomyelitis. The main causes of death are, as in recent years, heart disease, disease of the blood vessels and cancer and respiratory diseases excluding Tuberculosis, all diseases of old people.

Deaths of Infants under One Year of Age:

| <i>Causes.</i> | <i>Age.</i> | <i>Died at</i> |
|---|-------------|----------------|
| 1. Intra-cranial haemorrhage, atelectasis and patent foramen ovale | 2 days | Hospital |
| 2. Asphyxia due to smothering accidental (inquest) | New born | Home |
| 3. Spina Bifida and hydrocephalus | 10 weeks | Home |
| 4. Prematurity, Birth weight 1 lb. 8 oz. | 9 hours | Hospital |
| 5. Prematurity, " " 3 lb. 3 oz. | 8 hours | Hospital |
| 6. Broncho pneumonia, gastro enteritis and upper thoracic meningocele | 1 month | Hospital |

Two children died from prematurity, this is not easily preventable but nutrition of the mother may be one of the very important factors and here one must emphasise quality of food, i.e., meat, fish, eggs, butter and vegetables and 2 pints of milk a day, only a little bread or potatoes. One was an accidental death and no less than four suffered from so grave defects of development that they could not live. The causes of such defects are imperfectly understood and cannot at present be called preventable.

Section B.**GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.****Hospital Services.**

Rawmarsh is in the Sheffield Regional Hospital Board area. Rotherham and Mexborough Hospital Management Committee provide services in the area.

General Hospitals are:

- (a) Moorgate General Hospital, Rotherham.
- (b) Doncaster Gate Hospital, Rotherham.
- (c) Montagu Hospital, Mexborough.

In special cases, patients may be referred to hospitals outside the area, e.g. Sheffield and Leeds.

Geriatric Hospital.

Badsley Moor Lane, Rotherham.

Admission to this hospital for aged sick is invariably through the Moorgate General Hospital, where selection of suitable cases is undertaken, i.e., those that may be expected to recover completely or to a degree suitable for discharge. This unit is of great value in dealing with active treatment and rehabilitation of the aged sick.

Isolation Hospitals.

Cases of infectious disease are admitted to either Kendray Isolation Hospital, Barnsley, or to Lodgemoor, Sheffield. Both these hospitals are specially equipped for dealing with cases of Poliomyelitis. The Smallpox hospital for the area is Lodgemoor.

Maternity Hospitals.

- (a) Montagu Hospital, Mexborough.
- (b) Moorgate General Hospital, Rotherham.
- (c) Listerdale Maternity Home, Rotherham Rural District.
- (d) Hallamshire Maternity Home, Chapeltown.

An emergency obstetric unit is based on Moorgate General Hospital.

The Jessop Hospital, Sheffield, admits special cases.

Mental Hospitals.

Patients under observation are admitted to Moorgate General Hospital. When diagnosis is established transfer to Middlewood Hospital, Sheffield, is arranged. Direct admissions to Middlewood are possible.

Tuberculosis Sanatoria.

Dr. A. C. Morrison, Chest Clinic, Chatham Street, Rotherham, arranges the admission of patients in the Rawmarsh area to sanatorium.

Children's Hospital—Special Cases.

Children's Hospital, Western Bank, Sheffield.

Venereal Diseases.

Diagnosis and treatment is carried out at centres in Queen's Road, Barnsley, and 12, Frederick Street, Rotherham. The incidence is very low. A social worker traces contacts and visits those who default in treatment. In the course of the year, posters were distributed to factories in the area with the addresses of local treatment centres. The service is confidential.

Ambulance Service.

This is provided by the County Ambulance Service operating from a depot at Dunford House. The Depot Superintendent is Mr. F. Hyde. A fleet of modern ambulances is maintained. The depot is in wireless communication with the County depot and the depot at Denaby by means of a short wave receiver installed in one of the ambulances. Extensive alteration in the layout of the depot is in progress. All drivers

and attendants are trained in first aid and a proportion hold the St. John's Ambulance Certificate in Home Nursing. This service is controlled by a separate department.

Laboratory Service.

Public Health Laboratories are established in Sheffield and Wakefield. The service is free. These laboratories examine water, ice-cream, ice "lollies," food, milk, etc., for bacteriological contamination. They also render reports on clinical samples of throat swabs, sputum, etc. By their efficient service the health of the people is safeguarded. The grouping of blood for blood transfusion and other factors is done by the Blood Transfusion Service, Sheffield.

Infectious Diseases by Wards.

| Ward | Polio- myelitis | Measles | Whoop. Cough | Scarlet Fever | Pneu- monia | Diph- theria | Totals |
|-------------|--------------------|---------|-----------------|------------------|----------------|-----------------|--------|
| Ryecroft .. | — | 44 | 15 | — | — | — | 59 |
| Rosehill .. | 2 | 52 | 10 | 2 | 2 | 1 | 69 |
| East .. | — | 43 | 10 | — | — | — | 53 |
| West .. | — | 62 | 13 | 1 | — | — | 76 |
| South .. | — | 27 | 3 | 3 | — | — | 33 |
| Central .. | — | 43 | 22 | 2 | — | — | 67 |
| Totals .. | 2 | 271 | 73 | 8 | 2 | 1 | 357 |

Poliomyelitis

Two cases were notified during the month of August. Both occurring in infants who had not yet attended school. Unfortunately one case proved fatal.

Measles.

The outbreak which had begun in November of the previous year continued until May and was an extensive outbreak. Fortunately there were no fatal cases. One of the difficulties in dealing with an outbreak of Measles is that the disease is in its most infectious state before any rash appears. The complications of Measles can be prevented by the use of modern drugs.

Whooping Cough.

Cases of Whooping Cough were notified in every month save April. Whooping Cough is an exceedingly dangerous disease in tiny infants and is now a major infectious disease of infancy. As a great majority of deaths from Whooping Cough occur in the first year of life and as the disease can occur in infants a few weeks old protection by immunisation should be commenced at the third month. This protection is offered by all our clinics, free. A child who has been immunised will probably not get Whooping Cough but if the disease does develop it will be mild in nature.

Diphtheria.

A case of clinical Diphtheria occurred at the end of May in a child aged 7. The child was removed to Kendray Isolation Hospital, all the

contacts were examined and nose and throat swabs were taken repeatedly. Fortunately, the child made good progress and had a complete recovery. The Diphtheria bacillus was not grown on the throat swabs and therefore the diagnosis was made on clinical grounds. It cannot be emphasised too strongly that in dealing with such a dangerous disease as Diphtheria, a clinical diagnosis must always take precedence over a laboratory diagnosis. If the patient had not been immunised the result would most likely not have been so fortunate. It must be remembered that immunisation against Diphtheria does not absolutely prevent the disease but if an immunised person develops the disease recovery is the rule.

Opthalmia Neonatorum.

There was no case notified during the year.

Puerperal Pyrexia

There was no case notified during the year.

Scarlet Fever.

Eight cases were notified in the Urban District during the year. Where adequate home isolation is possible, uncomplicated cases can be nursed at home. Adequate isolation means a separate room for the patient; soap, wash basin and clean towel in the room; no visitors, particularly children; and nursing carried out as far as possible by one person. The parents must be sensible and co-operative. All cases treated at home are visited by the Sanitary Inspector and sometimes by the Medical Officer of Health. It is not reasonable to carry on home isolation in the case of food handlers, shop premises, etc.

The outbreak was mild in nature.

Tuberculosis.

Number on Register at 31st December, 1953.

| | | | | | Males. | Females. | Total |
|---------------|-----|-----|-----|-----|--------|----------|-------|
| Pulmonary | ... | ... | ... | ... | 41 | 24 | 65 |
| Non-Pulmonary | ... | ... | ... | ... | 12 | 8 | 20 |
| Totals | ... | ... | ... | ... | 53 | 32 | 85 |

Number removed from Register during 1953.

| | | | | Pulmonary | Non-Pulmonary | |
|---|-----|-----|-----|-----------|---------------|--------|
| | | | | Males. | Females. | Total. |
| Deaths | ... | ... | ... | 1 | — | 1 |
| Others (cured, re-diagnosed, transfers out of area, etc.) | | | | — | 1 | 1 |
| | | | | 1 | 1 | 2 |

Number added to Register during 1953.

| | Pulmonary | | Non-Pulmonary | | Total. |
|--|-----------|----------|---------------|----------|--------|
| | Males. | Females. | Males. | Females. | |
| New Notifications | 3 | 5 | — | — | 8 |
| Others (cases restored to register, transfers, etc.) ... | — | 1 | — | — | 1 |
| Totals ... | 3 | 6 | — | — | 9 |

New Notifications—Pulmonary.

| Age Groups. | | | Males. | Females. |
|------------------|-----|-----|--------|----------|
| 0—5 years | ... | ... | — | — |
| 5—15 „ | ... | ... | — | 1 |
| 15—25 „ | ... | ... | 1 | 2 |
| 25—35 „ | ... | ... | — | 1 |
| 35—45 „ | ... | ... | — | 1 |
| Over 45 „ | ... | ... | 2 | — |
| Totals | ... | ... | 3 | 5 |

No. of Contacts given B.C.G. Vaccine=10.

| | 1953 | 1952 | 1953 |
|-------------------------|-----------|-----------|-----------------|
| | Rawmarsh. | Rawmarsh. | Eng. and Wales. |
| Tuberculosis Death Rate | Nil | 0.05 | 0.20 |

Tuberculosis.

There were eight fresh notifications of Pulmonary Tuberculosis as against 10 in 1952. There were no deaths directly attributable to Tuberculosis.

The control of this disease, the last chronic infectious disease of major importance in this country rests on early detection and diagnosis of the victims : Once a case is diagnosed active treatment can begin, at home or in the sanatorium and even surgical removal of the affected area if confined to one portion of the lung is possible. These are great advances and both control and treatment are much more active than in former years—consequently the stay in sanatoria is often of short duration.

The death rate is falling rapidly but there are more cases surviving who may be, from time to time, infectious; consequently supervision is necessary.

Health Visitors act as the link between the patient, the Medical Officer of Health and the Chest Physician. After-care consists of free milk, bed linen and beds (where necessary for segregation), Home Helps and subsistence grants.

There is also a voluntary fund at the disposal of the Chest Physician for assisting special cases. The Council have housed cases of active disease where this is necessary. On the school health side and at our

Infant Welfare Clinics we carry out jelly testing where indicated. There is no undue delay in obtaining sanatorium treatment. We are making sound progress in reducing the incidence of the disease in Rawmarsh.

Section 47, National Assistance Act, 1948.

This provides for the removal to suitable premises of persons in need of care and attention. No action was taken in the district during 1953.

Sanitary Circumstances of the Area and Housing.

Sewage Works.—Extensions to sewers in connection with new housing estates were completed in the course of the year. There were no new major works at the sewage works.

Water Supply.—This is obtained from the Sheffield Corporation via Rotherham and is supplied, filtered and chlorinated. It is regularly sampled and analysed and is always of the highest purity. At the beginning of April a new reservoir of 500,000 gallons capacity was officially put into operation. This makes the total storage capacity 1 million gallons or $1\frac{1}{2}$ days water supply at normal consumption. The reservoir is so constructed that engineers can walk underneath it to inspect the structure. The reinforcement is such that though the reservoir may subside or tilt due to mining subsidence it will not fracture.

A pumping station with recording gauges, all automatically controlled, is alongside the reservoir but on separate foundations so that independent settling may take place. The connections to the reservoir are by flexible couplings. All these precautions have been taken on account of the fear of subsidence due to coal mining under the site. The new reservoir was necessary owing to the increased demands for water for industry and housing and also to supply the higher parts of Rawmarsh, i.e., Higher Stubbin and Monkwood.

The reservoir is now in commission and the improvement will be complete when a new 15" rising main is installed from Rotherham to the storage reservoir at the Haugh. The existing 10" main has served the district for almost 90 years—a tribute to the foresight of those who planned for the future: The pumps are electrically operated and there is an existing diesel engine generator which can be used in the event of a failure in the mains supply.

Housing.—There has been a great change in the housing position in the past year. No less than 100 permanent houses were completed for the Council and 2 for private enterprise. The Coal Industry Housing Association, on a site at Sandhill, completed 280 houses for miners. This rapid rate of building has made a material difference to the severe overcrowding that has existed in so many of our homes since 1939 and subsequently.

At the end of the year the position had so improved that it was possible to see a time when we can again consider clearance and demolition of some of the older, unfit property within the district. Adequate housing is the essential foundation for healthy family life. I am very pleased at the steady progress that is being made in rehousing.

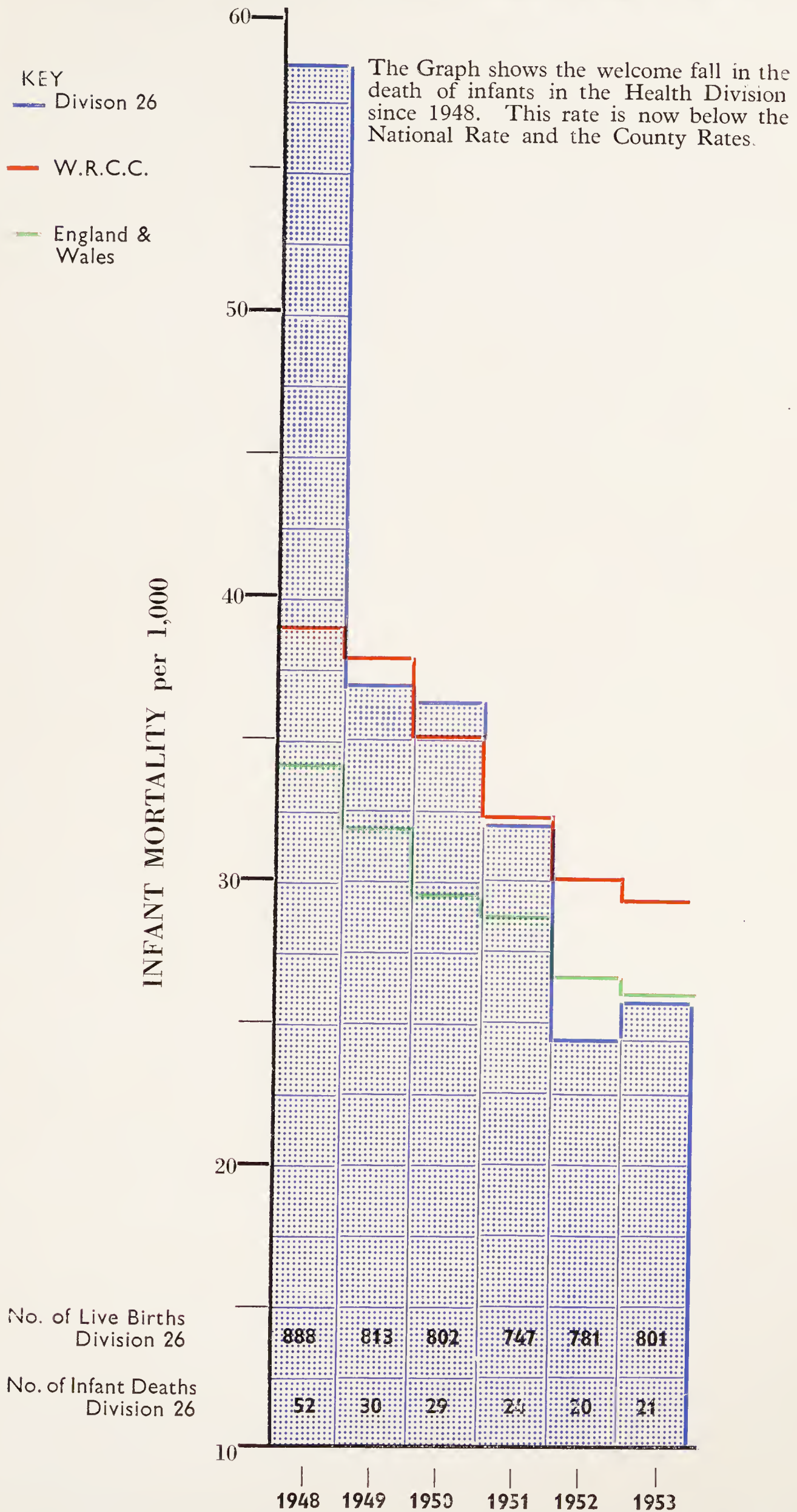
Smoke Abatement.—The Council is a member of the Sheffield and District Smoke Abatement Committee. The basis of the law preventing smoke nuisances was passed as long ago as 1875 and specifically excludes

any suppressive action in certain industrial processes, if this action would interfere with the smooth working of these processes. The main exemptions being mining and steel working. These exemptions stand to this day, although in 1926 the Minister was given power to remove any process from the list. In other words, mining and steel working are in the main protected by a law passed in 1875 when no one really knew how to prevent smoke. Great technical advances have been made since then and it is now possible with modern equipment to greatly reduce and even abolish smoke in all industrial processes, but there is as yet no effective legislation to enforce the abolition.

If District Councils are given effective legislation Medical Officers of Health will see that it is enforced; at present we can only observe and advise. This legislation should also cover domestic fires which can all burn smokeless fuel—domestic fires can cause severe pollution and must be controlled.

Clean air is necessary for community health in the same way as clean food or water. It is sometimes said that we are behind the U.S.A. in this respect—British engineers can devise boiler furnaces and dust arrestment plants every bit the equal of any devised elsewhere—but many states in the U.S.A. make smoke abatement compulsory and failure to comply is linked with severe penalties. It is a remarkable thing that scientists can produce special atmospheres for special processes—for example, humidity control in cotton spinning mills and in woollen mills. In the same way they can devise efficient furnaces which do not produce smoke, and dust arresting plants of high efficiency, but until District Councils have effective powers to compel their installation only a minority of companies will install them. Filthy soot-laden air is the curse of most industrial areas in this country. It can be prevented by legislation which is related to reality and to mid-20th century technical advances and not to conditions existing in 1875.

Infant Mortality Rates per 1,000, 1948 to 1953



PERSONAL HEALTH SERVICES—DIVISION 26.

(Rawmarsh, Swinton and Wath Urban Districts)

Summary of Vital Statistics for 1952 and 1953 for Division 26.

| | 1953 | 1952 |
|---|--------|-------|
| Area of Division | 7,990 | acres |
| Estimated Population | 45,010 | |
| Birth Rate (per 1,000 estimated population) .. | 17.80 | 17.45 |
| Death Rates (per 1,000 estimated population): | | |
| All Causes | 10.18 | 10.21 |
| Cancer | 1.76 | 1.54 |
| Heart and Circulatory | 3.69 | 3.84 |
| Infective and Parasitic Diseases, excluding T.B. .. | 0.07 | 0.11 |
| Respiratory Diseases | 1.07 | 1.41 |
| Respiratory Tuberculosis | 0.04 | 0.05 |
| Other Tuberculosis | 0.07 | 0.02 |
| All Tuberculosis | 0.11 | 0.07 |
| Maternal Mortality | Nil | Nil |
| Infant Mortality (Rate per 1,000 live births) .. | 26.22 | 24.33 |

Comparative Table of Vital Statistics for Urban and Rural Districts in the West Riding and England and Wales for 1953.

| | Live Birth Rate | Death Rate | Infective and Parasitic Dis's, excluding T.B. Death Rate | Respiratory Diseases Death Rate | Heart and Circulatory Diseases | Cancer | Tuberculosis Death Rate All Forms | Infant Mortality Rate | Maternal Mortality |
|-----------------------------|--------------------|------------|---|---------------------------------------|--------------------------------------|--------|---|-----------------------------|-----------------------|
| Division 26 .. | 17.80 | 10.18 | 0.07 | 1.07 | 3.69 | 1.76 | 0.11 | 26.22 | Nil |
| U.D.'s in West Riding | 15.4 | 12.5 | 0.09 | 1.39 | 4.63 | 1.99 | 0.19 | 27.6 | 0.38 |
| R.D.'s in West Riding | 16.6 | 9.3 | 0.07 | 1.06 | 3.27 | 1.57 | 0.15 | 33.3 | 0.81 |
| Administrative County .. | 15.7 | 11.6 | 0.08 | 1.30 | 4.26 | 1.88 | 0.18 | 29.3 | 0.51 |
| England and Wales .. | 15.5 | 11.4 | * | * | * | 1.99 | 0.20 | 26.8 | 0.76 |

* Figures not available.

All figures per 1,000 population except last two columns.

There was no Maternal Death in the health division in the year under review. The Infant Mortality rate was lower than the rates for England and Wales and the rates for Urban and Rural Districts in the County. The Infant Mortality rate remains a sound index of the social conditions in the area, and a low rate such as we enjoy is an indication that in matters of health, nutrition, housing and general sanitation, great progress is being made. A glance at the graph will show that twice as many children

under 1 year of age died in 1948 than in 1953. With the rate now below National level, it will be difficult to obtain further reduction. Whilst generally the Infant Mortality rate is falling, there is still a lower Neonatal, Infant Mortality, and Stillbirth rate for the Registrar General Class I (Professional) occupations than for Class V (unskilled) occupations and this difference is remaining constant. Factors such as nutrition, housing, number of pregnancies and the interval between them, to say nothing of mothers working late on in pregnancy may all have more to do with this difference in rates than purely medical or obstetrical factors. The fact that such a difference does exist points to the hope that still lower Infant Mortality rates may be possible.

The low death rate from Tuberculosis is encouraging.

Home Nursing Service in Division 26.

The staff consists of six full-time nurses and three part-time. The service is at the disposal of the Family Doctor to assist him in the care of sick people in their own homes. The services of a Home Nurse are requested by the Family Doctor and she is instructed in her duties by him. The standard of the nurses work and general supervision is the responsibility of the Divisional Medical Officer, assisted by the Supervisor of Home Nurses who visits them periodically. No charge is made for the service.

Any equipment required for the home nursing of a sick person is obtainable from Dunford House on loan—if not in stock, it can be ordered or obtained from the County Pool. The equipment remains the property of the West Riding County Council and is returnable when no longer required. Expensive equipment, in some instances, requires a Consultant's recommendation. By having an efficient service many hospital beds can be saved, particularly in the case of prolonged illness requiring only nursing care, and in the case of the aged sick and feeble. The Home Nurses also nurse cases of acute illness in younger people and infants where hospital admission may not always be the best thing. There has been a considerable increase in the work in the past year and the staff have responded magnificently.

| | <i>No. of Cases Assisted</i> | | | | | | <i>Visits</i> |
|------|------------------------------|----|------|----|----|----|---------------|
| 1953 | .. | .. | 1034 | .. | .. | .. | 25348 |
| 1952 | .. | .. | 845 | .. | .. | .. | 22526 |

The increase in work is partly due to increased demand throughout the whole of the year and also due to the fact that calls on the service did not diminish to the extent usual in the summer months. For every 1,000 of the population, 23 cases were helped and 563 visits made. In Rawmarsh, the Headquarters of the service is the Multiple Clinic, Barber's Avenue. All Home Nurses are on the phone and in addition, messages may be left at Dunford House.

Infant Welfare and Health Visiting Service.

| Centre | Doctor in Charge | No. of individual children who attended during the year | Total No. of attendances made by children in previous column during the year | |
|----------------|---------------------|--|--|----------------------|
| | | | Under 1 yr. of age | Over 1 yr. of age |
| Wath | * | 248 | 1651 | 409 |
| West Melton .. | * | 191 | 1064 | 885 |
| Swinton .. | Dr. I. Campbell | 429 | 2871 | 1038 |
| Kilnhurst .. | Dr. J. Core | 136 | 683 | 457 |
| Rawmarsh .. | Dr. J. Core | 432 | 1383 | 705 |
| Parkgate .. | Dr. M. R. Menzies | 135 | 396 | 218 |
| Totals .. | | 1571 | 8048 | 3712 |

* Wath and West Melton: Dr. G. J. O'Keeffe .. 1st January—21st April, 1953.
Dr. M. Lister .. 27th April—31st December, 1954.

No. of Home Visits made by Health Visitors within the Division during the Year :

| | First Visits. | Total Visits. |
|--------------------------------|---------------|---------------|
| Expectant Mothers | 143 | 231 |
| Children under 1 year | 784 | 5789 |
| Children between 1 and 5 | * | 10029 |
| Other cases | * | 4244 |
| Totals | 927 | 20293 |

* Figures not available.

The staff of Health Visitors has been temporarily increased to nine: one nurse who does not hold the Health Visitors certificate is also employed. Health Visitors are State Registered Nurses and Midwives and have, in addition, spent an extra year obtaining a Health Visitor's certificate. In the course of the year, Miss Carr obtained her certificate and commenced work in the Rawmarsh area.

During the year, a certain amount of reorganisation took place. Dr. G. J. O'Keeffe asked to be relieved of his clinic work at Wath and West Melton owing to increasing demands on his time from general practice. The vacancy was filled by Dr. Marion Lister from Rawmarsh.

In order to have a more even check on the children from 1 to school age it was decided to encourage mothers to bring toddlers for examination at least twice in the second year, and at least once in the third and fourth years. This could only be done by cutting down on the too frequent inspections of the healthy one year olds, as our Infant Welfare Centres are all working to capacity. Where defects are discovered requiring medical treatment, the babies are referred to the Family Doctors. The Health Visitors visit the babies in their homes. In addition to their many other duties, the Health Visitor is responsible by virtue of the 1946 Act for all health advice and education to the whole of the family and not only to infants and school children. In each of the districts, every Health Visitor now has a list of feeble, aged, chronic sick, etc., all of whom remain under

supervision in case their condition alters for the worse. When adverse social conditions are found amongst such cases, these are a matter for the Divisional Medical Officer. Where individual illness is discovered, the Family Doctor should be informed directly by the Health Visitor.

The Health Visitors also supervise the running of all the school clinics, Child Welfare and ante-Natal Clinics. In their capacity as school nurses, they visit all schools. They are responsible for the supervision of the Home Help service—we have an average of 47 part-time Home Helps in the division assisting no less than 150 cases a week. This service is becoming increasingly difficult to supervise with the present staff of Health Visitors, which has not been increased, although the number of cases assisted has more than doubled. Adequate supervision can only be carried out at the expense of Health Visiting which is still of vital importance in South Yorkshire.

Each Health Visitor has a district allocated. They are encouraged to contact Family Doctors direct and not through the divisional office. They can be of great assistance to the Family Doctor, provided they work together, particularly in the care of the two most vulnerable age groups, the young and the aged.

Maternity Services.

BIRTHS.

| | | | Domiciliary | Institutional | Proportion of Domiciliary to Institutional |
|-------------|----|----|-------------|---------------|--|
| Wath | .. | .. | 166 | 100 | 8: 5 |
| Swinton .. | .. | .. | 137 | 90 | 3: 2 |
| Rawmarsh .. | .. | .. | 149 | 182 | 7: 8 |

ANTE-NATAL CLINICS.

| Clinic | Doctor in Charge | No. of women who attended | No. of women who attended for blood exam. only | Total No. of attendances made by women |
|-------------|---------------------|---------------------------------|---|--|
| Wath | Dr. D. Chapman | 90 | 54 | 646 |
| Swinton .. | Dr. H. H. Smith | 214 | — | 812 |
| Rawmarsh .. | Dr. M. Scott | 331 | 8 | 1219 |
| Totals .. | | 535 | 62 | 2677 |

POST-NATAL CLINICS.

(Held jointly with Ante-Natal Clinics)

| Clinic | Doctor in Charge | Number of women who attended | Total No. of attendances made by women |
|-------------|---------------------|---------------------------------|---|
| Wath | Dr. D. Chapman | 42 | 52 |
| Swinton .. | Dr. H. H. Smith | 49 | 49 |
| Rawmarsh .. | Dr. M. Scott | 27 | 34 |
| Totals .. | | 118 | 135 |

RELAXATION CLASSES.

| Clinic | Officer in Charge | Number of women who attended | Total No. of attendances made by women |
|-----------------|--------------------------|---------------------------------|---|
| Swinton | Midwife F. Launderers | 46 | 409 |

For the second year running, there was no Maternal Death in the division. In Rawmarsh, the Family Doctors were approached to see whether they would prefer to staff the Ante-Natal Clinic on a yearly rota basis: as this did not meet with universal approval, it was decided to appoint Dr. M. Scott. The two midwives sessions were cancelled and the midwives now hold a Thursday afternoon booking session, following Dr. Scott's morning session. This clinic is again a very busy one. All the clinics are well attended but I would like to see some mothers book their midwives earlier in pregnancy.

One midwife proceeded on a refresher course in London.

Midwife Rodgers resigned from the service in December, 1953, and this left us with only one resident midwife in Rawmarsh. Midwife Parker from Kilnhurst was given the district in Rawmarsh. The two vacancies for midwives were not filled at the end of the year.

The number of Wath cases confined to hospital increased by 57. This was due to more admissions to Mexborough Montagu where there had been staffing difficulties the previous year. Of the 372 cases confined in hospital, 175 were discharged before the 14th day, *i.e.* 48%. Such cases are visited at home by our district midwives.

Relaxation Classes were commenced at Rock House, Swinton, and were most successful. Midwife Launderers had previously attended a resident course of instruction on relaxation in childbirth. Attendances at these classes were limited to mothers expecting their first baby and in some few cases to mothers expecting their second child. The instruction was based on the principle that fear of the unknown causes anxiety or tension and that both of these can be banished by a clear understanding of what happens in childbirth and by learning how to relax. The instruction is supplemented by life size diagrams and each mother is taught exactly how to relax.

Mothers who have attended a full course of instruction have no fear of childbirth; are co-operative with the midwife and in many cases do not require either Gas and Air or Pethidine and have an easy birth. It is hoped eventually to have a midwife trained to instruct similar classes in each area.

PREMATURE BIRTHS.

| District | Born Alive | | | Still-born | | | No. Rem. to Hosp. after Birth | No. who survived 28 days | | |
|---------------|------------|-------------|-------|------------|-------------|-------|--|-----------------------------|-------------|-------|
| | At Home | In Hosp. | Total | At Home | In Hosp. | Total | | At Home | In Hosp. | Total |
| Wath | 6 | 4 | 10 | 2 | — | 2 | 1 | 4 | 4 | 8 |
| Swinton . . . | 6 | 4 | 10 | — | — | — | 2 | 4 | 3 | 7 |
| Rawmarsh . . | 4 | 10 | 14 | 1 | 2 | 3 | — | 4 | 8 | 12 |
| Totals . . . | 16 | 18 | 34 | 3 | 2 | 5 | 3 | 12 | 15 | 27 |

Of the 34 premature births (*i.e.* birth weight below $5\frac{1}{2}$ lbs.), 27 survived the dangerous first four weeks of life. Special equipment and specially trained midwives are available to nurse these babies. They remain under the midwife's care until they have reached $5\frac{1}{2}$ lbs. in weight. There were 10 fewer premature births than in 1952. The death of these seven premature babies accounts for no less than $\frac{1}{3}$ of our total infant mortality: all the more reason why we must do everything we can to prevent prematurity.

Care of the Unmarried Mother and Her Child.

There were 29 illegitimate births in the division. Nineteen of these came to our notice. The mother kept the baby in sixteen instances: this is the best solution. In one case the parents married. One baby was adopted, and one died. This group is singled out for special care as there is a natural tendency to avoid ante-natal supervision and to leave all arrangements until the last possible moment. Miss Spooner, the Moral Welfare Worker appointed by the Church of England, has been of great help in arranging for these cases to be accommodated and assisting the mothers.

Domestic Help Service.

Establishment of Domestic Helps 17 Full time
 No. of Domestic Helps employed 47 Part-time
 Cases provided with Domestic Help during the year ended 31st December, 1953:

| | No. of Cases | Hours |
|--|--------------|-------|
| 1. Maternity (including expectant mothers) .. | 101 | 9087 |
| 2. Tuberculosis | 4 | 512 |
| 3. Chronic Sick (including aged and infirm) .. | 149 | 24023 |
| 4. Others | 38 | 5777 |
| Totals | 292 | 39399 |

This service continues to expand. An average of 47 part-time Home Helps was employed through the year as against 34 the year before. One clerk is now fully employed on this work and from time to time requires assistance. 38 more individual cases were assisted and the total hours worked has increased from 31652 to 39399.

Supervision of the service is becoming difficult for as many as 150 cases weekly are receiving assistance and the Health Visitors who are responsible for supervision can only do so adequately if other work is to be neglected. The service is not a free one and a charge is made according to the recipients income. All members of the household over the age of 21 are assessed as it is considered all receive benefit from the service. In the great majority of old age cases, a nil assessment is made. The service saves a large number of hospital beds and allows old people to remain in their own homes who would otherwise most probably have to be admitted to homes or hospitals.

MENTAL HEALTH SERVICE.

Mentally Defective Persons.

| | Rawmarsh | Swinton | Wath | Total |
|--|----------|---------|------|-------|
| 1. (a) Total No. | 37 | 34 | 42 | 113 |
| (b) No. ascertained during 1953 | 2 | 3 | 6 | 11 |
| 2. (a) No. under Guardianship | 2 | 1 | — | 3 |
| (b) No. under Statutory Supervision | 29 | 29 | 36 | 94 |
| (c) No. under Voluntary Supervision or Observation | 6 | 4 | 4 | 14 |
| (d) No. on licence from Institutions | — | — | 2 | 2 |
| 3. (a) No. awaiting Institution admission | 5 | 3 | 2 | 10 |
| (b) No. attending Group Training Classes | 4 | 9 | 6 | 19 |
| (c) No. receiving Home Training | 1 | 1 | 1 | 3 |
| (d) No. in Remunerative Employment | 9 | 6 | 13 | 28 |

Our Mental Health Home Teacher, Mrs. L. Feasey, proceeded on a year's training course at Manchester. The instruction of Mental Defectives was continued on a restricted basis by sharing an instructor from Division 30 (Mexborough). The classes are at present held in the clinics at Dunford House, Rock House, Swinton, and Barber's Avenue, Rawmarsh. Some of the children have made progress at simple handicrafts and have benefitted by contact with other children. Those who attended the classes will form the first intake for the Occupation Centre which is to be built at Wath-upon-Deane. This is to be a centre to train up to 65 cases and it is to be designed so that it may be enlarged to accommodate 100 cases. The Centre will be a day one and will take children and adults. The usual hours of attendance being 9.30 a.m. to 3.30 p.m. Cases may attend from neighbouring health divisions and transport or bus vouchers will be provided. The cases attending will be those who are not able to find employment but are bright enough to be helped socially and trained in simple tasks of a repetitive nature, *e.g.* brush making, weaving, clay modelling, etc. The Centre will be a great relief to the parents of the children and experience elsewhere leaves no doubt that it will help the children greatly in social adaptation.

There is still the greatest difficulty in obtaining accommodation in institutions for these cases on the urgent waiting list. This difficulty will continue until new accommodation is built. The delay in obtaining admission makes a happy home life impossible in some of the affected homes.

CHILDREN LIKELY TO BE NEGLECTED OR ILL-TREATED IN THEIR OWN HOMES.

The Divisional Medical Officer is the appointed co-ordinating officer for the investigation of significant cases of child neglect or ill-treatment.

There has been a considerable improvement in some of the cases we have had under review during the past year. This work involves close collaboration with the Children's Officer, Education Executive Officer, and Inspector Coxon of the N.S.P.C.C. Meetings are held from time to time and frequent exchange of information takes place. With the improved housing position and the clearing out of "squatters' huts" and camps, cases of neglect and cruelty are more easily discovered. We have, unfortunately, still a few problem families who, true to their tradition, successfully defy all attempt at rehabilitation and are content to live in the midst of appalling squalor produced by their own neglect of the simplest rules of hygiene.

AFTER-CARE ON DISCHARGE FROM HOSPITAL.

| | No. of Cases |
|--|-----------------|
| Assisted by Midwife (discharged before the 14th day) | 345 |
| Assisted by Home Nurse | 17 |
| Assisted by Health Visitor | 139 |
| Background Reports provided for Hospital Staffs | 375 |
| Number of Patients referred to Medical Officer on discharge .. | 517 |

The Divisional Medical Officer is notified of all admissions to, and discharges from, hospital, by arrangement with the Regional Hospital Board. In some instances, the hospital authorities require background reports on the patient's home circumstances and these are supplied by our Health Visitors.

On discharge, arrangements can be made for supervision by a Health Visitor, Home Nurse, or Midwife. This is very important when aged people are sent home, as nowadays, alas, many of them live all alone and they need help immediate on discharge. When patients return from mental hospitals, the Mental Health Social Worker visits if they so wish. In cases of Tuberculosis, free milk, bedding for segregation, grants, and very often rehousing, are all social means of promoting recovery.

A large proportion of long term illness is now nursed at home and these patients need occupational therapy. The changes produced by a new interest in life have to be seen to be believed. Severe affliction becomes tolerable, where previously life was a burden. The Welfare Department are responsible for this very necessary service.

DIPHTHERIA IMMUNISATION.

The number of children in the 5-14 age group immunised is very satisfactory—almost 100% in Swinton. There is still a need for more immunisation under the age of 5. This position will improve when we are in a position to use the combined Whooping Cough and Diphtheria Vaccine.

DIPHTHERIA IMMUNISATION.

| Urban District | No. of Children Immunised in 1953 | | | No. of Children given booster doses during 1953 | | No. of Children Immunised at any time up to 31/12/53 | | | Estimated Mid-Year Population | | | Percentage | |
|----------------|--------------------------------------|--------------|-------|--|--|--|--------------|-------|----------------------------------|--------------|-------|-----------------|--------------|
| | Under 5 Yrs. | 5—14 Yrs. | Total | | | Under 5 Yrs. | 5—14 Yrs. | Total | Under 5 Yrs. | 5—14 Yrs. | Total | Under 5 Yrs. | 5—14 Yrs. |
| Wath | 145 | 53 | 198 | 191 | | 637 | 1838 | 2475 | 1246 | 2211 | 3457 | 51.1 | 83.1 |
| Swinton | 160 | 84 | 244 | 97 | | 595 | 1770 | 2365 | 1090 | 1825 | 2915 | 54.6 | 97.0 |
| Rawmarsh | 165 | 100 | 265 | 472 | | 623 | 2630 | 3253 | 1587 | 3019 | 4606 | 39.3 | 87.1 |

SMALLPOX VACCINATION.

Number of Persons Vaccinated or Re-vaccinated during 1953.

| Age at 31.12.53, <i>i.e.</i> , born in years | Under 1 1953 | 1—4 1949/52 | 5—14 1939/48 | 15 or over before 1939 | Total |
|---|-----------------|----------------|-----------------|---------------------------|-------|
| No. vaccinated .. | 15 | 11 | 2 | 20 | 48 |
| No. re-vaccinated .. | — | 1 | 2 | 28 | 31 |

There is great apathy about infant vaccination. In spite of the outbreak of Smallpox in the West Riding, it was very difficult to persuade mothers to have this carried out. Mothers think it is no longer necessary.

WHOOPING COUGH IMMUNISATION.

This is offered at all clinics to children up to the fourth birthday. Mothers are keen on Whooping Cough protection because it is still a common disease. They do not realise that Smallpox and Diphtheria may re-appear in our midst.

SCHOOL HEALTH SERVICE.

There are approximately 8,400 school children in the health division. Children are medically examined at school entry, on transfer to secondary school, and as school leavers. They may also be examined at any other time where it appears necessary. Dr. M. R. Menzies carries out the greater part of this work. Dr. Scott assisted in a part-time capacity. A free inter-change of information exists between the Family Doctors, Children's Hospital, Dr. C. C. Harvey, the Child Health Specialist, and the School Medical Officers and the Chest Physicians. Children with long term illness are under supervision at frequent intervals.

A case of tuberculosis of the pulmonary variety was diagnosed in a girl attending a secondary modern school. Every teacher in contact with the child and her fellow classmates were X-rayed—no further cases were discovered out of 36 children and 12 teachers.

The health of the school children is satisfactory.

Clinics Held by the School Health Service.

1. School Clinics are held at all Child Welfare Centres with either Dr. M. R. Menzies or myself in charge.
2. Ultra-violet Light Clinics are held at Wath and Rawmarsh with a Health Visitor in charge.
3. Oculist Clinics are held at Wath and Rawmarsh with Dr. F. Fischer in charge.
4. A Child Guidance Clinic is held at Rawmarsh with Dr. M. M. MacTaggart in charge. Cases from other divisions are also referred to this clinic.

5. The Paediatric Clinic is held at Rawmarsh with Dr. C. C. Harvey in charge.
6. The Orthopaedic Clinic is held at Rawmarsh with Mr. Hertzog in charge.
7. E.N.T. Clinic is held at Montagu Hospital with Mr. P. H. Beales in charge.
8. Speech Therapy Clinic is held at Rock House, Swinton, with Miss M. Fish in charge.

Number of Inspections of Schoolchildren.

| | |
|--|-------------|
| Entrants | 1128 |
| Last year in Primary School | 640 |
| School Leavers | 656 |
| Total | 2424 |
| Number of Special Inspections | 3297 |
| Number of Re-inspections | 1001 |
| Total | 4298 |
| Grand Total of Inspections carried out | 6722 |

Cleanliness of School Children and Head Infestation.

| | <i>Total Children Infested</i> | <i>School Population</i> | <i>Percentage Infested</i> |
|-----------------------|------------------------------------|------------------------------|--------------------------------|
| Rawmarsh and Parkgate | 319 | 3365 | 9.5 |
| Swinton and Kilnhurst | 67 | 1500 | 4.5 |
| Wath and West Melton | 102 | 2618 | 3.9 |

Comparative Figures.

| | <u>1952</u> | <u>1953</u> | <i>W.R.C.C.</i> <u>1952</u> | <i>Eng. and Wales</i> <u>1952</u> |
|-----------------------|-------------|-------------|--------------------------------|--|
| Total No. infested .. | 705 | 488 | — | — |
| Total children | 7219 | 7483 | — | — |
| Total percentage .. | 9.8 | 6.5 | 8.2 | 6.0 |

Detailed Breakdown of Figures.

| District | GIRLS | | | BOYS | | |
|----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|
| | No. Infested | Popula- tion | Percent- age | No. Infested | Popula- tion | Percent- age |
| Rawmarsh | 252 | 1562 | 16.1 | 67 | 1743 | 3.8 |
| Swinton | 59 | 743 | 7.8 | 8 | 757 | 1.1 |
| Wath | 77 | 1282 | 6.0 | 25 | 1396 | 1.8 |
| Division | 388 | 3587 | 10.8 | 100 | 3896 | 2.6 |

The figures for 1953 are based on the school population as at June, 1953. The total school population excludes the children attending Wath G.S.

These figures have been accurately kept over a period of one year by an individual card system for each child. From the detailed analysis of figures it will be seen that this is mainly a problem in girls schools, that the incidence is higher in Rawmarsh than in Swinton or Wath and, most hopefully, that the numbers are being reduced. Close attention is being given to effect a greater improvement.

Care of Handicapped Children.

| <i>Admitted to</i> | <i>No.</i> |
|--|------------|
| Residential School for E.S.N. Pupils | 3 |
| Hostel for Maladjusted Boys | 1 |
| Residential School for Deaf or Partially Deaf Pupils | 7 |
| Residential School for Deaf E.S.N. Pupils | 1 |
| Residential School for Partially - sighted Pupils | 2 |
| Residential School for Blind Pupils | 1 |
| Residential School for Delicate Pupils | 1 |
| <hr/> | |
| Total number of children placed in special schools .. | 16 |
| <hr/> | |
| Number of children receiving Home Education | 2 |
| Total no. of children receiving education other than at an ordinary school | 18 |

It is worthy of report that accommodation for pupils in the various handicapped groups is now much more easily obtained. The table shows how many pupils have been allocated places and are in attendance at these schools.

Details of Medical Examinations Carried Out for Various Authorities.

| | |
|--|----|
| College Entrants examined | 36 |
| Teachers examined | 5 |
| Superannuation Examinations for (County) | 23 |
| Superannuation Examinations for (Local Councils) | 5 |

RAWMARSH URBAN DISTRICT COUNCIL

Annual Report of the Sanitary Inspector for the Year 1953.

*To the Chairman and Members of the
Rawmarsh Urban District Council.*

August, 1954.

Mr. Chairman, Madam and Gentlemen,

It is my privilege to submit for your consideration my third annual report on the sanitary circumstances of the district for the year ending 31st December, 1953.

There was a slight reduction in the number of complaints received but more inspections were needed to secure the abatement of nuisances than in 1953. The reason is that some property owners and agents are taking more time in which to comply with notices. Whilst stopped or defective drains, leaking roofs and spouting are the commonest grounds for complaints an increasing number of reports of dilapidated Yorkshire ranges have been received.

Owing to a high sickness rate and the difficulty of replacing workmen, refuse collection could not be maintained at a weekly frequency throughout the year. Whilst there has been a reduction in overall costs of refuse collection and disposal, salvage income was disappointing. Some time was spent in securing the replacement of many dilapidated dustbins at private houses.

Routine sampling of milk, ice-cream, ice-lollies, water and swimming bath water was continued throughout the year. On the whole results were very satisfactory. Because of pressure of other work it was not possible to give increased attention to food hygiene.

Undoubtedly the greatest contribution to the better health of the district is the housing progress made during the year. The number of families who obtained homes of their own, the overcrowded families rehoused and the medical cases dealt with, amply justify the amount of time devoted to housing work. The conditions in which families in slum property are compelled to live, remain to be alleviated, and it is to be hoped that with so much progress in other aspects of housing, the resumption of slum clearance will not be delayed long.

I wish to thank the Chairman and Vice-Chairman of the Health Committee and the Members of the Council for their support and encouragement. As usual, the Clerk of the Council and Medical Officer of Health have willingly given their advice and assistance. Finally my thanks to the staff of the Department who have played their full part in the activities of the Department.

I am, Mr. Chairman, Madam and Gentlemen,

Your obedient Servant,

G. RAWLINSON,

Chief Sanitary Inspector.

General.

| | | | | | |
|--|-----|-----|-----|-----|------|
| Inspections re alleged nuisances | ... | ... | ... | ... | 1728 |
| Number of nuisances in hand at the end of 1952 | ... | ... | ... | ... | 56 |
| Number of nuisances found in 1953 | ... | ... | ... | ... | 699 |
| Total Number of nuisances needing abatement | ... | ... | ... | ... | 755 |
| Number of nuisances abated | ... | ... | ... | ... | 662 |
| Number of nuisances outstanding at end of 1953 | ... | ... | ... | ... | 93 |
| Number of Informal Notices served | ... | ... | ... | ... | 699 |
| Number of Informal Notices complied with | ... | ... | ... | ... | 662 |
| Number of Statutory Notices served | ... | ... | ... | ... | 22 |
| Number of Statutory Notices complied with | ... | ... | ... | ... | 17 |
| Number of summonses or other legal proceedings | ... | ... | ... | ... | — |

Complaints and Alleged Nuisances.

During the year 705 complaints were received, and 1728 inspections were made to deal with them. As in the previous year many of the complaints were made by tenants whose landlords ignored requests for housing repairs. It would appear that some property owners wait to receive an intimation from the Department before undertaking repairs. The reason for this attitude is the high cost of repairs, due to which many landlords are getting little or no return from their property. At the year end the Government gave hopes that they would facilitate the early resumption of slum clearance. There are many worn out houses in the District, and each year they show progressive deterioration.

Works Executed.

The following repairs or sanitary improvements were effected as the result of action taken by the Department :—

| | No. of Houses |
|--|------------------|
| Roofs repaired and made weather-proof | 93 |
| Rainwater spouting repaired and made water-tight | 97 |
| Chimney stacks repaired or rebuilt | 9 |
| House walls rebuilt, repaired, or pointed | 3 |
| Windows, replaced, repaired, or re-corded | 20 |
| Doors replaced, or made weather-proof | 14 |
| Food Stores improved | 1 |
| Ceiling repaired or reconstructed | 29 |
| Wall replastered and/or water-proofed | 31 |
| Floors repaired or re-formed | 19 |
| Staircases repaired | 3 |
| Kitchen ranges repaired or replaced | 46 |
| Fireplaces repaired or rebuilt | 6 |
| Flues repaired, or obstructions cleared | 8 |
| Set-pot washboilers repaired | 6 |
| Steps re-formed and made secure | 1 |
| Yard paving repaired or re-formed | 18 |
| Coal-stores repaired or rebuilt | 5 |
| Yard walls repaired or rebuilt | 2 |
| Water pipes repaired | 15 |
| Waters taps replaced | 3 |
| Sufficient water supply restored | 66 |

| | | | | | | |
|---|-----|-----|-----|-----|-----|-----|
| Insanitary sinks replaced | ... | ... | ... | ... | ... | 16 |
| Sink waste pipes repaired or replaced | ... | ... | ... | ... | ... | 15 |
| Gullies replaced | ... | ... | ... | ... | ... | 6 |
| Choked drains and gullies cleansed | ... | ... | ... | ... | ... | 100 |
| Cellar drainage improved or provided | ... | ... | ... | ... | ... | 1 |
| Flooded cellars pumped out or cleansed | ... | ... | ... | ... | ... | 1 |
| Cellar coal chutes repaired | ... | ... | ... | ... | ... | 3 |
| New drains laid | ... | ... | ... | ... | ... | 9 |
| Drains re-laid or made water-tight | ... | ... | ... | ... | ... | 16 |
| Disused drains removed/sealed | ... | ... | ... | ... | ... | 3 |
| Additional gullies provided | ... | ... | ... | ... | ... | 2 |
| Additional Inspection Chambers provided | ... | ... | ... | ... | ... | 3 |
| Inspection Chambers repaired | ... | ... | ... | ... | ... | 6 |
| Inspection Chamber covers replaced | ... | ... | ... | ... | ... | 11 |
| Ventilation/Soil pipes repaired or replaced | ... | ... | ... | ... | ... | 5 |
| Additional water-closets provided | ... | ... | ... | ... | ... | 9 |
| Water-closet structures repaired or rebuilt | ... | ... | ... | ... | ... | 24 |
| Water-closet pedestal fittings replaced | ... | ... | ... | ... | ... | 16 |
| Obsolete W.C. fittings replaced by pedestals | ... | ... | ... | ... | ... | 2 |
| Water-closets cleansed | ... | ... | ... | ... | ... | 2 |
| Water-closet connections and fittings repaired | ... | ... | ... | ... | ... | 18 |
| Water-closet seats replaced | ... | ... | ... | ... | ... | 8 |
| W.C. flushing cistern or flush pipes repaired or replaced | ... | ... | ... | ... | ... | 47 |
| Dustbins provided or replaced | ... | ... | ... | ... | ... | 478 |
| Offensive accumulations or deposits removed | ... | ... | ... | ... | ... | 10 |
| Dangerous structures demolished | ... | ... | ... | ... | ... | 1 |
| Rat infested structures removed | ... | ... | ... | ... | ... | 2 |
| Houses cleansed or disinfested | ... | ... | ... | ... | ... | 4 |
| Miscellaneous nuisances | ... | ... | ... | ... | ... | 4 |

Housing Statistics.

| | | | | |
|---|-----|-----|-----|------|
| Number of dwellinghouses in the district | ... | ... | ... | 5648 |
| Number of back-to-back houses included in above | ... | ... | ... | — |

1. Inspection of dwelling houses during the year.

| | | | | |
|--|-----|-----|-----|------|
| (1) (a) Total number of dwellinghouses inspected for housing defects (under Public Health or Housing Acts) | ... | ... | ... | 387 |
| (b) Number of inspections made for the purpose | ... | ... | ... | 1311 |
| (2) (a) Number of dwellinghouses (included under sub-head (1) above), which were inspected and recorded under the Housing Consolidated Regulations | ... | ... | ... | 1 |
| (b) Number of inspections made for the purpose | ... | ... | ... | 4 |
| (3) Number of dwellinghouses needing further action :— | | | | |
| (a) Number considered to be in a state so dangerous or injurious to health as to be unfit for human habitation | ... | ... | ... | 31 |
| (b) Number (excluding those in sub-head (3) (a) above), found not to be in all respects reasonably fit for human habitation | ... | ... | ... | 356 |

2. Remedy of defects during the year without service of formal notices.

Number of defective dwellinghouses rendered fit in consequence of informal action by the Local Authority or their officers 357

3. Action under Statutory Powers during the year :—

A. Proceedings under Sections 9, 10 and 16, Housing Act, 1936 :—

(1) Number of dwellinghouses in respect of which notices were served requiring repairs ... Nil

(2) Number of dwellinghouses which were rendered fit after service of formal notices :—

(a) By owners Nil

(b) By Local Authority Nil

B. Proceedings under Public Health Acts.

(1) Number of dwellinghouses in respect of which notices were served requiring defects to be remedied 31

(2) Number of dwellinghouses in which defects were remedied after service of formal notices :—

(a) By Owners 23

(b) By Local Authority in default of owners Nil

3. Action under Statutory Powers during the year :—

C. Proceedings under Sections 11 and 13 of the Housing Act, 1936.

(1) Number of representations, etc., made in respect of dwellinghouses unfit for habitation ... 1

(2) Number of dwellinghouses in respect of which Demolition Orders were made Nil

(3) Number of dwellinghouses demolished in pursuance of Demolition Orders Nil

D. Proceedings under Section 12 of the Housing Act, 1936.

(1) Number of separate tenements or underground rooms, in respect of which Closing Orders were made Nil

(2) Number of separate tenements or underground rooms, the Closing Orders in respect of which were determined, the tenement or rooms having been rendered fit Nil

4. Housing Act, 1936—Part IV—Overcrowding.

| | | | | | | | |
|---------|--|-----|-----|-----|-----|-----|-----|
| (a) (1) | Number of dwellings overcrowded at the end of the year | ... | ... | ... | ... | ... | 59 |
| (2) | Number of families dwelling therein | ... | ... | | | | 86 |
| (3) | Number of persons dwelling therein | ... | ... | | | | 437 |
| (b) | Number of new cases of overcrowding reported during the year | ... | ... | ... | ... | ... | 14 |
| (c) (1) | Number of cases of overcrowding relieved during the year | ... | ... | ... | ... | ... | 63 |
| (2) | Number of persons concerned in such cases | ... | | | | | 547 |

5. New Houses.

Number of new houses provided during the year :—

| | | | |
|---|-----|-----|-----|
| By the Local Authority :—Permanent Type | ... | ... | 100 |
| Temporary Type | ... | ... | 0 |
| By Private Enterprise (incl. Coal Industry Housing Association) | ... | ... | 282 |

Temporary and Movable Dwellings.

A constant watch has to be kept to control movable dwellings which come into the district, and one warning was given to remove an unlicensed van. Enquiries continue to be received from families without their own homes as to the possibility of occupying caravans as a temporary solution to their housing difficulties, but as there are no suitable sites in the District, enquirers are advised accordingly.

Two sites were licensed for six movable dwellings occupied solely by workers at a local building project.

Five individually licensed caravans are sited in the district for a limited period of one year.

Thirty-nine hutments remain in occupation at Red Ash Hill Camp, one Nissen Hut having been demolished during the year. The remaining Nissen Huts and a number of the wooden huts are showing increasing signs of deterioration, and some demolition will have to be carried out in 1954.

Water Supply.

Twelve samples were taken from taps fed by the water-mains, at representative points throughout the District, for bacteriological examination at the Public Health Laboratory. In eleven cases the laboratory report showed a nil count per 100 ml. for both probable numbers of coliform bacilli and faecal coli : by Ministry of Health standards water of this quality is highly satisfactory. One sample from a roadside standpipe was found to be contaminated; the reason for the contamination was found to be a loose joint in the pipe and after repair a repeat sample gave a highly satisfactory result.

One sample was taken from the Upper Haugh service reservoir which had been out of use for some time. The water was found to be highly contaminated. The Council authorised the erection of a protective fence to prevent unauthorised access to the reservoir area and before being restored to use the reservoir is to be cleansed and sterilised.

Public Swimming Bath.

Six monthly samples were taken from the Council's swimming baths for bacteriological examination, and in all cases the water was found to be satisfactory.

Sanitary Accommodation.

| | | | | | | |
|--|-----|-----|-----|-----|-----|-------|
| Number of Water-closets | ... | ... | ... | ... | ... | 6556 |
| Number of additional W.C's provided at existing property in 1953 | ... | ... | ... | ... | ... | 9 |
| Number of W.C's provided at new houses in 1953 | ... | ... | ... | ... | ... | 408 |
| Number of Pail closets | ... | ... | ... | ... | ... | 12 |
| Number of Privies with open middens | ... | ... | ... | ... | ... | 32 |
| Number of Privies with covered middens | ... | ... | ... | ... | ... | 14 |
| Number of Privies converted to W.C's in 1953 | ... | ... | ... | ... | ... | 0 |
| Percentage of W.C's | ... | ... | ... | ... | ... | 99.12 |

A water carriage drainage scheme was prepared for houses at Chapel Walk, Upper Haugh, but little progress had been made by the year end. The National Coal Board were requested to provide water-closets to replace pails at New Stubbin Colliery and a scheme was duly prepared, the plans being approved by the Council.

Verminous or Filthy Houses.

Disinfestation was carried out in 4 houses to eradicate bed-bugs. Liquid insecticide was the medium used.

No statutory action was necessary but three informal cleansing notices were served.

Rodent Control.

The Sewers were tested to ascertain the extent of rat infestation and were twice treated by poison bait. Despite the routine six-monthly poison treatment of the sewers, which has been done for some years, a hard-core of rats remain after each treatment and ensure the continuity of the species.

Eighty-eight complaints of rat or mice infestations were received and appropriate poisoning treatment was applied in each case. Domestic properties are treated without charge and other premises on repayment. The Council's tip and other properties were treated as required but no large-scale infestations were found.

The use of "Warfarin," one of the newest and safest of poisons, proved exceedingly successful against mice; this poison can be used with safety in food premises and where livestock are kept. Whilst most householders report rats, very few seek the Council's help in dealing with mice infestations.

Infectious Diseases.

Cases of notifiable disease were investigated as required and reports made to the Medical Officer of Health. Routine home disinfection in scarlet fever cases was discontinued in conformity with procedure in most other districts. Library books from houses where infectious diseases occurred were fumigated prior to being returned to circulation.

Atmospheric Pollution.

The Sheffield and District Smoke Abatement Committee deal with this aspect of the work and all complaints were referred to the Chief Inspector for attention.

Smoke and fumes from iron and steel works, a chemical and coke oven plant and collieries, and many similar sources in the adjacent districts cause serious atmospheric pollution.

The average monthly figures for the measuring apparatus are given below. The recorded deposits at both the Rawmarsh and Parkgate gauges show a reduction on the 1952 figures but the Parkgate figure is highly excessive by any standards.

| | Rawmarsh Barbers Avenue | Parkgate Aldwarke Road | Parkgate Council Offices |
|---|-------------------------------|------------------------------|--------------------------------|
| Deposit Gauge-Tons per Square mile | 18.04 | 117.78 | — |
| Lead Peroxide Apparatus—SO ³ mg/1000 sq. cms./Day ... | 1.835 | 3.039 | — |
| Smoke Filter—mg/100 Cubic Metres Daily Average ... | — | — | 32.96 |

Close watch was kept on dust emission from two tar-slag plants. At one plant, dust suppression measures completed during the year did reduce the nuisance to an appreciable degree. The second plant is more favourably sited having regard to the prevailing wind direction, but serious nuisance is caused to nearby householders when the wind is in their direction. Town planning and slum clearance may in the future solve the problem.

Factories.

1. Inspections under the Factories Act, 1937, for purposes of provisions as to Health.

| | No. on Register | No. of Inspections | Written Notices |
|---|--------------------|-----------------------|--------------------|
| (1) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authority | 5 | 15 | — |
| (2) Factories not included in (1) in which Section 7 is enforced by the Local Authority | 48 | 39 | 4 |
| (3) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises) ... | 5 | 7 | 1 |
| | <u>58</u> | <u>61</u> | <u>5</u> |

2. Cases in which defects were found :—

| | No. of Cases | Remedied | Referred by H.M. Inspector |
|--|-----------------|----------|----------------------------------|
| Want of cleanliness (S:I.) | — | — | — |
| Overcrowding (S.2) | — | — | — |
| Unreasonable temperature (S.3) ... | — | — | — |
| Inadequate ventilation (S.4) ... | — | — | — |
| Ineffective drainage of floors (S.6) | — | — | — |
| Sanitary Conveniences (S.7) : | | | |
| (a) Insufficient | 2 | 2 | 1 |
| (b) Unsuitable or defective ... | 3 | 2 | 2 |
| (c) Not separate for sexes ... | — | — | — |
| Other offences against the Act (not including offences relating to Outwork) | — | — | — |
| | 5 | 4 | 3 |

One certificate that suitable means of escape in case of fire had been provided at a factory was issued under Section 34.

Shops.

Twelve inspections were made under the Shops Act, 1950, and one contravention of the Act was found. Most of the statutory requirements concerning shops are administered by the County Council, which is the enforcing authority for the District.

Meat and Other Food Inspection.

The meat supplies for the district come from the Rotherham and Sheffield Abattoirs and on several occasions it has been necessary to complain to the carrying contractors, regarding the transport of this meat. Prior to the war there were 14 slaughter houses in the District but few of these are suitable for re-use when controls are taken off meat and slaughtering. No request was received to examine privately killed pigs.

The following foodstuffs were inspected at local food premises and found to be unfit.

| | Cwts. | qrs. | lb. |
|---|-------|------|-----|
| Tinned Meats | 2 | 3 | 6 |
| Tinned Vegetables | 1 | 3 | 0 |
| Tinned and Dried Fruits and Preserves ... | 2 | 1 | 23 |
| Tinned Milk | | 1 | 9 |
| Tinned Fish | | 2 | 8 |
| Sausage | | 3 | 16 |
| Bacon | | | 2 |
| Cheese | | | 18 |
| Butter | | 2 | 0 |
| Cereals | | 2 | 14 |
| Coconut Ice | 4 | 0 | 2 |
| | 14 | 0 | 14 |

Others Items.

| | | | | | | | | |
|-------|-------|-----|-----|-----|-----|-----|-----|--------|
| Eggs | ... | ... | ... | ... | ... | ... | ... | No. 73 |
| Sauce | | ... | ... | ... | ... | ... | ... | No. 3 |

Milk.

There are 46 retail milk distributors in the district, 38 of whom trade from shops selling sterilised milk, and in a few cases, pasteurised. In May, the area, by order of the Minister of Food, was made a specified area in which only designated milk could be sold. This means that all milk sold in the district is either "Accredited," Tuberculin Tested or Heat Treated. Milk sold by retail is 100% bottled. It was necessary to warn one dealer regarding the deposit of bottled milk on a footpath verge. Ninety-six inspections were made.

The following licences for designated milks were issued :—

| | Dealers | Supplementary |
|------------------------|---------|---------------|
| Pasteurised Milk | 5 | 4 |
| Sterilised Milk | 40 | 3 |
| Tuberculin Tested Milk | 2 | 3 |

The following are details of samples taken for bacteriological examination at the Public Health Laboratory :—

| | No. of Samples | No. Satisfactory |
|---------------------------------------|----------------|------------------|
| Tuberculin Tested (Farm Bottled) Milk | 9 | 8 |
| Tuberculin Tested (Pasteurised) Milk | 10 | 10 |
| Pasteurised Milk | 18 | 18 |
| Sterilised Milk | 12 | 12 |

Two samples of Tuberculin Tested (Farm Bottled) Milk were obtained from a producer-retailer in the district for biological examination to detect tubercle infection; both samples were negative.

The County Health Department took the following samples of locally processed milk.

| | No. of Samples | No. Satisfactory |
|------------------|----------------|------------------|
| Pasteurised Milk | 27 | 27 |
| Sterilised Milk | 27 | 27 |

The sampling results are considered very satisfactory.

Ice-cream.

Forty-seven premises are registered for the retail sale of ice-cream and one as a producer-retailer; there were two new registrations during the year. The producer-retailer did not manufacture ice-cream during the year. All retailers sell pre-packed ice-cream only. A number of mobile traders come into the district, but most of these dealers sell only the pre-packed article. Eighty-five visits were made to ice-cream premises.

Sixty-four samples were taken with the following results :—

| No. of Samples | Percentage | Provisional Grade | 1—Satisfactory |
|----------------|------------|-------------------|------------------|
| 54 | 84.38 | | |
| 7 | 10.94 | " | 2—Fair |
| 1 | 1.56 | " | 3—Poor |
| 2 | 3.12 | " | 4—Unsatisfactory |

All the grade 3 and 4 samples were produced outside the district and the Chief Sanitary Inspector of the district concerned was requested to take the matter up with the producer.

The sale of ice-lollies continued to increase. Seven samples were taken and one was found to be unsatisfactory.

Other Food Premises.

| | No. | Visits |
|-------------------------|-----|--------|
| Bakehouses | 8 | 25 |
| Butchers | 24 | 47 |
| Fried Fish Shops | 20 | 39 |
| Other Food Premises ... | — | 125 |

Six licensed premises were found to have unsatisfactory sanitary accommodation and repairs or improvements were secured or in hand at the end of the year. At one of the older licensed houses the owners were approached regarding overdue large scale hygienic improvements; in this case a complete reconstruction scheme was pending at the year end.

One unsatisfactory mobile canteen was closed as a result of town planning action. At two food premises improved refuse storage arrangements were obtained and at another three an insufficient water supply was improved. The proprietor of a food stall at a local fair was given notice to cleanse a dirty food container.

Two reports of unfit or contaminated foodstuffs were received but owing to lack of sufficient evidence the Council were unable to proceed against the vendor. The outcome of one of these cases was a question in Parliament by the local Member, regarding the marking of factory-produced bread as a means of identification.

The hope was expressed last year that it would be possible to devote more time to supervision of food premises but, pressure of other work has prevented this. Whilst the general standard of food premises in the district is satisfactory, a great deal can be achieved by regular visits of inspection and advice to food handlers.

Offensive Trade.

The only offensive trade in the district is that of tripe-boiling. The premises are reasonably well kept but are badly situated, being surrounded by houses. No complaints were received. Seventeen inspections were made.

Hairdressers' Premises.

All 16 hairdressers' premises in the districts were registered under the West Riding County Council (General Powers) Act, 1951. Any person wishing to open a new business in the district now has to apply for registration beforehand and his premises will have to come up to a satisfactory standard before the Council are recommended to grant the registration. Byelaws made by the Council in 1952 control the conduct of the trade.

Public Cleansing.

This service, controlled by the Department, includes refuse collection and disposal, salvage operations, gully cleansing, sewer flushing and public conveniences.

The refuse collection fleet consists of 3 "Karrier" 10 cubic yard vehicles, 1 "Karrier" 7 cubic yard vehicle, and a "Morris" van. The small "Karrier" vehicle, obtained in 1942, is now in bad mechanical condition and its early replacement is desirable.

Improved and more conveniently situated garage facilities are an urgent need to facilitate satisfactory maintenance and vehicle repair.

For refuse collection purposes the district is divided into three rounds, and at the year end each team had a driver and four loaders. In the early part of the year a 7/9 days collection of refuse was attained but owing to the holidays, a high sickness and absentee rate towards the end of the year, and men leaving the service the teams could not be fully manned and the frequency of collection fell. Great difficulty was experienced in obtaining suitable labour to fill vacancies. The number of employees is governed by the estimates, and when more than three men are off work at any one time, teams have to turn out below strength with the result that the work falls behind schedule.

All refuse is disposed of by tipping at either Claypit Lane or, since May, at Upper Haugh Quarry. Arrangements were made to tip refuse from the northern part of the district at the latter side in order to conserve tipping space at the main tip at Claypit Lane. The tips are, as far as possible, organised on lines recommended by the Ministry of Health, but after the horse was disposed off the difficulty was to obtain covering material. The cost of doing this by manpower alone is prohibitive, and mechanical equipment is the answer. In addition to removing and replacing top soil and securing covering material, mechanical equipment ensures consolidation of the tip, and reduces the risk of fire; adequate covering will also restrict insect and rodent infestations. A series of fires occurred at Claypit Lane tip necessitating calling in the Fire Service on several occasions, assisted by our employees. The fires were completely extinguished by the year end.

A number of alternative tipping sites were inspected and negotiations were commenced during the year in respect of one of them. The Claypit Lane tip is nearing completion at the present tipping level, and if an alternative site is not obtained it will be necessary to tip another layer of refuse which will heighten the site by 5/6 feet.

Details of refuse removal and approximate costs :—

| | |
|--|----------------|
| No. of motor loads of refuse | 3913 |
| Total estimated weight, based on test weighings | 8981 |
| No. of premises from which collections are made | 5923 |
| Nett Cost of refuse collection and disposal : Approx. | £9102 |
| Cost per ton : | „ 20s. 3¼d. |
| Cost per premises : | „ 30s. 8¾d. |
| Cost per 1,000 premises | „ £1536.14.7d. |
| Cost per 1,000 inhabitants | „ £482.17.0d. |

Compared with 1952 fewer but heavier loads of refuse were removed from a larger number of premises. Despite rising costs the net cost of refuse collection was over £250 less than in the previous year. Income from salvage was disappointingly low. The price of waste paper never recovered after last year's fall, and this accounts for the lower figures.

| | T. | C. | Q. | L. | £ | s. | d. |
|------------------------|----|----|----|----|------|----|----|
| Paper | 60 | 7 | 3 | 0 | 415 | 13 | 11 |
| Ferrous Metal | | 15 | 0 | 0 | 4 | 2 | 6 |
| Textiles | 1 | 18 | 0 | 22 | 38 | 18 | 8 |
| Household Bones | | 6 | 2 | 0 | 1 | 17 | 4 |
| | 63 | 7 | 1 | 22 | £460 | 12 | 5 |

Owing to the dilapidated condition of many dustbins it was necessary to make 681 inspections in connection with securing the provision of new dustbins. As a result of notices served 478 new dustbins were provided. In 201 cases statutory notices were served and one owner made an unsuccessful court appeal against a notice.

The "S & D" Gully Emptier was delivered in May and has been a big asset to the Department. Gullies can now be emptied efficiently and hygienically and in addition the machine facilitates the emptying of the few cesspools in the district, and is used for sewer flushing. It was also very useful for carrying water to the tip when fires occurred.

The public conveniences are cleansed daily. Four of the urinals require structural improvements.

Housing Management.

The Department deals with applications for tenancies, the allocation of houses, exchanges, tenancy transfers, sub-tenancy applications, tenants complaints, and welfare matters.

The list of applicants is kept up-to-date as far as possible and at 31st December the following applications were on the list. For the purpose of comparison the figures of August, 1952, are shown.

| 31.12.53 | | | 31.8.52 | | |
|----------|-------------|-------|---------|-------------|-------|
| Tenants | Sub-Tenants | Total | Tenants | Sub-Tenants | Total |
| 375 | 317 | 692 | 302 | 516 | 818 |

The figures speak for themselves and the improvement in the housing position in the district is due to the Council's progressive policy and the building schemes of the Coal Industry Housing Association. The most significant feature of the figures is the reduction of 199 in the number of applicants without homes of their own.

There were 59 houses known to be overcrowded which were occupied by 86 families. There is little serious overcrowding and the cases referred to are likely to be reduced during 1954 by the Council's rehousing programme.

The Council allocate houses as follows : Lists are selected according to building progress, and 50% of each list consists of applicants without their own homes housed on the length of time married, and the other 50% selected on housing need alone. In addition to normal allocations the Council dealt with urgent medical cases on the recommendation of the Medical Officer of Health, and other emergency cases according to the circumstances.

The Council do not stand in the way of tenants who for various reasons wish to exchange to another house and those tenants who need larger accommodation, and those whose houses are under-occupied are encouraged to transfer to more suitable accommodation. A small exchange list is kept at the Office and it has been possible to arrange exchanges for tenants who have made their requirements known. During the year 32 exchanges of tenancies took place, involving 58 Council tenants and 8 private tenants. Ten tenants were transferred to more suitable accommodation. Twenty-three tenancies were transferred, 21 to widows, following decease of a tenant.

The houses allocated were as follows :—

| |
|------------------|
| 97 post-war type |
| 19 pre-war type. |

116 Total.

These were allocated to 86 applicants without their own homes, and 30 tenant applicants.

